1	Sheet	1	of	_1

									م م	<u>ر</u> ار الراب الرا					
Form PTO-1	449		U.S. DEPARTMENT OF		ENT OF	ATTY. DOCKET NO.		SERIAL NO.							
OFFICE				PA	ATE	NT	AND	TF	RADEMARK	00P7407US (8706-439)		Unassign	ned		
INFORMATIO STATEMENT													°₩.		
(Use sever	al she	eet	si	if	nec	ces	sar	y)					Ĕ Z		
(Use several sheets if necessary)										APPLICANT	S. C.				
•										JaiPrakash et al.					
									FILING DATE	GROUP					
										Concurrently herewith		Art Ur	nit 281	4	
U.S. PATI	ENT D	oc	UM.	EN'	Г						.		<u> </u>		
EXAMINER INITIALS	· !	I	DOCUMENT NUMBER			R	DATE	NAME	CLASS SUBCLAS			DATE F PRIATE			
K-CC		5 .	9	8	1	3	3	2	11/9/99	Mandelman et al.	438	246			
K-ic		6	0	1	8	1	7	4	1/25/00	Schrems et al.	257	296			
										•					
											:				
	·											-		•	
FOREIGN I	PATEN	т	DO(CUN	MEN	ITS				· · · · · · · · · · · · · · · · · · ·	1				
		DOCUMENT NUMBER DATE					MRF	D D	DATE	COUNTRY		SUBCLAS	TRANSLATION		
	DOCUMENT NUMBER				DATE	CONTRI		S	YES	NO					
													i		
	-				-			-			-	-			
					L	<u> </u>	l	Ш		L	<u> </u>				
OTHER DOO	UMEN	TS	(II	nclu	din	g Au	thor	f, T	itle, Date, Pert	cinent Pages, Etc.)					
	:														
. [·		
EXAMINER	~		h ´	- 6	υL			_	CHEN	DATE CONSIDERED 02 -04 -02	_				

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.